STATEMENT OF

RECEIVE

FORM 1		ORGAN	IZATI	ON		2012 OCT 31	AMII: 59
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		mple:If typing, type r the lines.	12FE4M5	Time OsoPank	CENTER
OKLAHON	/A RE	PUBLIÇAN I	EADE	RSHIP FED	ERAL C	ОММІТ ТІ	EE
ADDRESS (number a	and street)	P. O. BOX	74127	4			
(Check if address is changed)		BOYNTON	BEAC	H	FL	33474	
			CITY		STATE	ZIP COD	E
COMMITTEE'S E-MA (Check if is change	address	SS (Please provide only only only only only only only only		dress) ershipCommi	ittees@y	ahoo.con	<u>n</u> , , , ,
COMMITTEE'S WEE	B PAGE AC	DRESS (URL)					
(Check if is change							
2. DATE 10)" ′ Ž4	4° ′ 2 0′12					
3. FEC IDENTIFIC	CATION N	UMBER C	•				
4. IS THIS STATE	MENT 2	NEW (N) O	R [AMENDED (A)			
I certify that I have	examined 1	his Statement and to the	best of my	knowledge and belief it	is true, correct	and complete.	
Type or Print Name	of Treasure	EDWARD	BUSH	<u> </u>			
Signature of Treasure	er	Reduand	1 Bu	6h	Date 10	′ 24°′′ 2	20 1 12 *
NOTE: Submission of	false, error	eous, or incomplete inform	•			the penalties of 2 L	J.S.C. §437g.
Office Use				For further information of Federal Election Commission Toll Free 800-424-9530		FEC FOR	

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
5.	TYPE OF C	OMMITTEE				
	(a)	Committee: This committee is a principal campaign committee. (Complete the candidate information belo	w)			
			•			
	(b) [This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name of Candidate					
	Candidate Party Affiliati	Office Sought: House Senate President	State			
	·, ·	July C. Harris C. Harr	District			
	(c) .	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate					
	Party Con	nmittee:				
	(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
	Political A	ction Committee (PAC):	٠			
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its of	connected organization is a:			
		Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperativa			
		In addition, this committee is a Lobbyist/Registrant PAC.				
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party			
	_	In addition, this committee is a Lehbyist/Regietrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	🗂	draising Representative:				
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds fo committees/organizations, st least one of which is an authorized committee of a federal candidate.				
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.					
	3.					
	4					

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		
OKLAHOMA RE	EPUBLICAN LEADERSHIP FEDERAL COM	IMITTEE
6. Name of Any Connected	Organization, Affiliated committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
NONE		
Mailing Address		11111
		!-!
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
 Custodian of Records: Idea books and records. 	entify by name, address (phone number - optional) and position of the person in po	essession of committee
Full Name EDW	ARD BUSH	<u> </u>
Mailing Address	P. O. BOX 741274	
	BOYNTON BEACH FL 3347	74
Title or Position	CITY STATE	ZIP CODE
POLITICAL AFF	AIRS DIRECTOR Telephone number [561] - [4	144, - 5340
8. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name EDW of Treasurer	ARD BUSH	1 1 1 1 1 1 1
Mailing Address	P. O. BOX 741274	
	BOYNTON BEACH FL 3347	74 - - - - - - - - - - - - -
Title or Position	CITY STATE	ZIP CODE

Telephone number

FEC Form 1 (R	evised 02/2009)		Page 4
Full Name of Designated Agent		1111	<u></u>
Mailing Address		1.1.1.1	
	СПУ	STATE	ZIP CODE
Title or Position			
	Telephone n	umber	
			
Banks or Other Depos safety deposit boxes or Name of Bank, Deposit		nittee deposits	funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	r maintains funds.	ittee deposits	tunds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.		tunds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO BANK		tunds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO BANK		[33426]
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. ELLS FARGO BANK [200 NORTH CONGRESS AVENUE]		
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING D The FEC added this page to the end of this filing to indicate he	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirma	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ceipt or Postmarked
PY	10/31/2012
PREPARER	DATE PREPARED

PREPARER (3/2005)